

Fill in this information to identify the case:

Debtor Name LEWIS M. IRVING

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number: 19-13930 (AMC)

☒ Check if this is an amended filing

Official Form 425C

Monthly Operating Report for Small Business Under Chapter 11

12/17

Month: DECEMBER Date report filed: 01/25/2020
MM / DD / YYYY

Line of business: CEMETERY NAISC code: 812220

In accordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury that I have examined the following small business monthly operating report and the accompanying attachments and, to the best of my knowledge, these documents are true, correct, and complete.

Responsible party: LEWIS M. IRVING

Original signature of responsible party: _____

Printed name of responsible party: LEWIS M. IRVING

1. Questionnaire

Answer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.

	Yes	No	N/A
If you answer No to any of the questions in lines 1-9, attach an explanation and label it Exhibit A.			
1. Did the business operate during the entire reporting period?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you plan to continue to operate the business next month?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you paid all of your bills on time?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Did you pay your employees on time?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Have you deposited all the receipts for your business into debtor in possession (DIP) accounts?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Have you timely filed your tax returns and paid all of your taxes?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Have you timely filed all other required government filings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Are you current on your quarterly fee payments to the U.S. Trustee or Bankruptcy Administrator?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Have you timely paid all of your insurance premiums?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If you answer Yes to any of the questions in lines 10-16, attach an explanation and label it Exhibit B.			
10. Do you have any bank accounts open other than the DIP accounts?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11. Have you sold any assets other than inventory?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12. Have you sold or transferred any assets or provided services to anyone related to the DIP in any way?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13. Did any insurance company cancel your policy?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14. Did you have any unusual or significant unanticipated expenses?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15. Have you borrowed money from anyone or has anyone made any payments on your behalf?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16. Has anyone made an investment in your business?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Debtor Name LEWIS M. IRVING

Case number 19-13930 (AMC)

17. Have you paid any bills you owed before you filed bankruptcy?

☐ ☒ ☐

18. Have you allowed any checks to clear the bank that were issued before you filed bankruptcy?

☐ ☒ ☐

2. Summary of Cash Activity for All Accounts

19. Total opening balance of all accounts

\$ 24,744.94

This amount must equal what you reported as the cash on hand at the end of the month in the previous month. If this is your first report, report the total cash on hand as of the date of the filing of this case.

20. Total cash receipts

Attach a listing of all cash received for the month and label it *Exhibit C*. Include all cash received even if you have not deposited it at the bank, collections on receivables, credit card deposits, cash received from other parties, or loans, gifts, or payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit C*.

Report the total from *Exhibit C* here.

\$ 10,198.00

21. Total cash disbursements

Attach a listing of all payments you made in the month and label it *Exhibit D*. List the date paid, payee, purpose, and amount. Include all cash payments, debit card transactions, checks issued even if they have not cleared the bank, outstanding checks issued before the bankruptcy was filed that were allowed to clear this month, and payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit D*.

Report the total from *Exhibit D* here.

- \$ 15,849.90

22. Net cash flow

Subtract line 21 from line 20 and report the result here.

This amount may be different from what you may have calculated as *net profit*.

+ \$ (5,651.90)

23. Cash on hand at the end of the month

Add line 22 + line 19. Report the result here.

Report this figure as the *cash on hand at the beginning of the month* on your next operating report.

This amount may not match your bank account balance because you may have outstanding checks that have not cleared the bank or deposits in transit.

= \$ 19,093.04

3. Unpaid Bills

Attach a list of all debts (including taxes) which you have incurred since the date you filed bankruptcy but have not paid. Label it *Exhibit E*. Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from *Exhibit E* here.

24. Total payables

\$ 2,450.00

(*Exhibit E*) Income Tax \$ 1,050.00 ☐

Property tax \$1,400.00

Debtor Name LEWIS M. IRVING

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4. Money Owed to You

Attach a list of all amounts owed to you by your customers for work you have done or merchandise you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it *Exhibit F*. Identify who owes you money, how much is owed, and when payment is due. Report the total from *Exhibit F* here.

25. Total receivables

\$ 0

(Exhibit F)

5. Employees

26. What was the number of employees when the case was filed?

0

27. What is the number of employees as of the date of this monthly report?

0

6. Professional Fees

28. How much have you paid this month in professional fees related to this bankruptcy case?

\$ 0

29. How much have you paid in professional fees related to this bankruptcy case since the case was filed?

\$ 15,000.00

30. How much have you paid this month in other professional fees?

\$ 0

31. How much have you paid in total other professional fees since filing the case?

\$ 0

7. Projections

Compare your actual cash receipts and disbursements to what you projected in the previous month. Projected figures in the first month should match those provided at the initial debtor interview, if any.

	Column A		Column B		Column C
	Projected	—	Actual	=	Difference
	Copy lines 35-37 from the previous month's report.		Copy lines 20-22 of this report.		Subtract Column B from Column A.
32. Cash receipts	\$ <u>14,000.00</u>	—	\$ <u>10,188.00</u>	=	\$ <u>3,802.00</u>
33. Cash disbursements	\$ <u>12,000.00</u>	—	\$ <u>15,849.90</u>	=	\$ <u>(3,849.90)</u>
34. Net cash flow	\$ <u>2,000.00</u>	—	\$ <u>(-5,651.90)</u>	=	\$ <u>(3,651.90)</u>
35. Total projected cash receipts for the next month:					\$ <u>14,000.00</u>
36. Total projected cash disbursements for the next month:					- \$ <u>12,000.00</u>
37. Total projected net cash flow for the next month:					= \$ <u>2,000.00</u>

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8. Additional Information

If available, check the box to the left and attach copies of the following documents.

- ☒ 38. Bank statements for each open account (redact all but the last 4 digits of account numbers).
- ☐ 39. Bank reconciliation reports for each account.
- ☐ 40. Financial reports such as an income statement (profit & loss) and/or balance sheet.
- ☐ 41. Budget, projection, or forecast reports.
- ☐ 42. Project, job costing, or work-in-progress reports.

LEWIS M. IRVING

19-13930AMC

EXHIBIT C

DEPOSITS

DATE:	11/26/19	TO	1/11/20
12/3	4,000.00		
12/4	2,000.00		
1/7	4,000.00		
1/9	198.00		
TOTAL	10,198.00		

Attachment to December Report

X

12,141.67
Please note that account 4335 had a deposit on 12/2/19 of ~~10,198.00~~ 12,141.67 which incorrectly placed in this account. These funds were inadvertently deposited by Allstate Insurance Company for a claim related to damages to debtor's home. Debtor withdrew such funds.

LEWIS M. IRVING

19-13930AMC

EXHIBIT D

DISBURSEMENTS

DATE: 11/26/19 TO 1/11/20

ACCT 4070

CHECKS

12/4	2,400.00
12/12	72.60
12/13	20.00
12/09	606.62
12/10	2,075.77
12/10	1,747.50
12/10	319.39
12/9	337.81
SUB TOTAL	7,579.69

12/9	ELECT CK ALLSTATE INS	227.96
12/10	DEBIT NJ EZPASS	55.00
SUB TOTAL		282.96

ACCT 4335

12/17	DEBIT GIANT	53.00
12/18	DEBIT COSTCOWHSE	921.56
12/18	DEBIT COSTCO GAS	26.27
12/23	DEBIT ATT	78.52
12/30	DEBIT LUKOIL	31.48
12/31	COSTCOWHSE	261.18
12/31	DEBIT CVS PHAR	111.98
12/31	DEBIT GIANT	41.43
12/31	DEBIT CVS PHAR	26.29
1/2	DEBIT LOWES	5,127.82
1/2	DEBIT US GAS	22.80
1/7	DEBIT MID ATLANTIC RETINA	198.00
1/7	" " " "	198.00
1/7	DEBIT GIANT	76.60
1/7	DEBIT COSTTGO GAS	52.87
1/8	DEBIT ATT	263.07
1/8	DEBIT IDL PROSVENT	109.75
1/8	DEBIT LOWES	98.00
1/9	DEBIT COSTCOWHSE	177.77
1/10	DEBIT LOWES	109.92
SUB TOTAL		7,987.25
TOTAL		15,849.90

Debtor Name **LEWIS M. IRVING**

Case number **19-13930 (AMC)**

000085298 01 AV 0.380 MTD01040122519420981 0055 11.07



LEWIS M IRVING
DIP CASE 19-13930 EDPA
278 THORNTON RD
THORNTON PA 19371

Page: 1 of 2
Statement Period: Nov 26 2019-Dec 25 2019
Cust Ref #: 4070-039-T-###
Primary Account #: 4070



Chapter 11 Checking

LEWIS M IRVING
DIP CASE 19-13930 EDPA

Account: 4070

ACCOUNT SUMMARY

Beginning Balance	6,081.40	Average Collected Balance	5,705.74
Deposits	6,000.00	Interest Earned This Period	0.00
Checks Paid	7,579.69	Interest Paid Year-to-Date	0.00
Electronic Payments	282.96	Annual Percentage Yield Earned	0.00%
Ending Balance	4,218.75	Days in Period	30

DAILY ACCOUNT ACTIVITY

Deposits

POSTING DATE	DESCRIPTION	AMOUNT
12/03	DEPOSIT	4,000.00
12/04	DEPOSIT	2,000.00
Subtotal:		6,000.00

Checks Paid

No. Checks: 8

*Indicates break in serial sequence or check processed electronically and listed under Electronic Payments

DATE	SERIAL NO.	AMOUNT	DATE	SERIAL NO.	AMOUNT
12/04	156	2,400.00	12/10	161	2,075.77
12/12	157	72.60	12/10	162	1,747.50
12/13	158	20.00	12/10	163	319.39
12/09	160*	606.62	12/09	164	337.81
Subtotal:					7,579.69

Electronic Payments

POSTING DATE	DESCRIPTION	AMOUNT
12/09	ELECTRONIC CK PMT-ARC, ALLSTATE F&C INS CHECKPAYMT 159	227.96
12/10	DEBIT CARD PAYMENT, *****30050163855, AUT 120919 VISA DDA PUR NEW JERSEY E ZPASS 888 288 6865 * NJ	55.00
Subtotal:		282.96

DAILY BALANCE SUMMARY

DATE	BALANCE	DATE	BALANCE
11/25	6,081.40	12/10	4,311.35
12/03	10,081.40	12/12	4,238.75
12/04	9,681.40	12/13	4,218.75
12/09	8,509.01		

Your ending balance shown on this statement is:

- Subtract any services charges shown on this statement.
- Subtract any automatic payments, transfers or other electronic withdrawals not previously recorded.
- Add any interest earned if you have an interest-bearing account.
- Add any automatic deposit or overdraft line of credit.
- Review all withdrawals shown on this statement and check them off in your account register.
- Follow instructions 2-5 to verify your ending account balance.

2. List below the amount of deposits or credit transfers which do not appear on this statement. Total the deposits and enter on Line 2.
3. Subtotal by adding lines 1 and 2.
4. List below the total amount of withdrawals that do not appear on this statement. Total the withdrawals and enter on Line 4.
5. Subtract Line 4 from 3. This adjusted balance should equal your account balance.

Ending Balance	4,218.75
Total Deposits	+
Sub Total	
Total Withdrawals	-
Adjusted Balance	

[illegible]

WITHDRAWALS NOT IN CASH
ON STATEMENT

[illegible]

FOR CONSUMER LOAN ACCOUNTS ONLY — BILLING RIGHTS SUMMARY

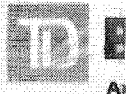
In case of Errors or Questions About Your Bill:

If you think your bill is wrong, or if you need more information about a transaction on your bill, write us at P.O. Box 1377, Lewiston, Maine 04243-1377 as soon as possible. We must hear from you no later than sixty (60) days after we sent you the FIRST bill on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights. In your letter, give us the following information:

- Your name and account number.
- The dollar amount of the suspected error.
- Describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item you are unsure about.

- You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your bill that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

FINANCE CHARGES: Although the Bank uses the Daily Balance method to calculate the finance charge on your Moneyline/Overdraft Protection account (the term "ODP" or "OD" refers to Overdraft Protection), the Bank discloses the Average Daily Balance on the periodic statement as an easier method for you to calculate the finance charge. The finance charge begins to accrue on the date advances and other debits are posted to your account and will continue until the balance has been paid in full. To compute the finance charge, multiply the Average Daily Balance times the Days in Period times the Daily Periodic Rate (as listed in the Account Summary section on the front of the statement). The Average Daily Balance is calculated by adding the balance for each day of the billing cycle, then dividing the total balance by the number of Days in the Billing Cycle. The daily balance is the balance for the day after advances have been added and payments or credits have been subtracted plus or minus any other adjustments that might have occurred that day. There is no grace period during which no finance charge accrues. Finance charge adjustments are included in your total finance charge.

Debtor Name **LEWIS M. IRVING**Case number **19-13930 (AMC)**

000100301 01 AV 0.380 MTD01040011220424399 0038 13 10



LEWIS M IRVING
DIP CASE 19-13930 EDPA
278 THORNTON RD
THORNTON PA 19371

Page: 1 of 3
Statement Period: Dec 12 2019-Jan 11 2020
Cust Ref #: [REDACTED] ###
Primary Account #: [REDACTED] 4335

6081-1-2-000-100

**Chapter 11 Checking**

LEWIS M IRVING
DIP CASE 19-13930 EDPA

Account # [REDACTED] 4335

ACCOUNT SUMMARY

Beginning Balance	16,058.75	Average Collected Balance	13,706.30
Deposits	4,000.00	Interest Earned This Period	0.00
Electronic Deposits	198.00	Interest Paid Year-to-Date	0.00
		Annual Percentage Yield Earned	0.00%
Electronic Payments	7,987.25	Days in Period	31
Ending Balance	12,269.50		

DAILY ACCOUNT ACTIVITY**Deposits**

POSTING DATE	DESCRIPTION	AMOUNT
01/07	DEPOSIT	4,000.00
	Subtotal:	4,000.00

Electronic Deposits

POSTING DATE	DESCRIPTION	AMOUNT
01/09	DEBIT CARD CREDIT, *****30049599624, AUT 010920 VISA DDA REF MID ATLANTIC RETINA WILM WILMINGTON * DE	198.00
	Subtotal:	198.00

Electronic Payments

POSTING DATE	DESCRIPTION	AMOUNT
12/17	DEBIT POS, *****30049599624, AUT 121719 DDA PURCHASE GIANT 6116 WEST CHESTER * PA	53.94
12/18	DEBIT POS, *****30049599624, AUT 121819 DDA PURCHASE COSTCO WHSE 1114 GLEN MILLS * PA	921.56
12/18	DEBIT POS, *****30049599624, AUT 121819 DDA PURCHASE COSTCO GAS 1114 GLEN MILLS * PA	26.27
12/23	DEBIT CARD PAYMENT, *****30049599624, AUT 122019 VISA DDA PUR AT T BILL PAYMENT 800 331 0500 * TX	78.52
12/23	DEBIT CARD PURCHASE, *****30049599624, AUT 122219 VISA DDA PUR LUKOIL 57732 EASTAMPTON * NJ	31.48
12/30	DEBIT POS, *****30049599624, AUT 123019 DDA PURCHASE COSTCO WHSE 1114 GLEN MILLS * PA	261.18
12/31	DEBIT POS, *****30049599624, AUT 123119 DDA PURCHASE CVS PHARMACY 04 04984 GLEN MILLS * PA	111.98
12/31	DEBIT POS, *****30049599624, AUT 123119 DDA PURCHASE GIANT 6116 WEST CHESTER * PA	41.43
12/31	DEBIT POS, *****30049599624, AUT 123119 DDA PURCHASE CVS PHARMACY 04 04984 GLEN MILLS * PA	26.29

Call 1-800-937-2000 for 24-hour Bank-by-Phone services or connect to www.tdbank.com

Your ending balance shown on this statement is:

- Subtract any services charges shown on this statement.
- Subtract any automatic payments, transfers or other electronic withdrawals not previously recorded.
- Add any interest earned if you have an interest-bearing account.
- Add any automatic deposit or overdraft line of credit.
- Review all withdrawals shown on this statement and check them off in your account register.
- Follow instructions 2-5 to verify your ending account balance.

1. List below the amount of deposits or credit transfers which do not appear on this statement. Total the deposits and enter on Line 2.
2. Subtotal by adding lines 1 and 2.
3. List below the total amount of withdrawals that do not appear on this statement. Total the withdrawals and enter on Line 4.
4. Subtract Line 4 from 3. This adjusted balance should equal your account balance.

Ending Balance	12,269.50
Total Deposits	*
Sub Total	
Total Withdrawals	-
Adjusted Balance	

[illegible]

POLICE	COUNTY
DRAWALS NOT ON STATEMENT	

[illegible]

FOR CONSUMER LOAN ACCOUNTS ONLY — BILLING RIGHTS SUMMARY

In case of Errors or Questions About Your Bill:

If you think your bill is wrong, or if you need more information about a transaction on your bill, write us at P.O. Box 1377, Lewiston, Maine 04243-1377 as soon as possible. We must hear from you no later than sixty (60) days after we sent you the FIRST bill on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights. In your letter, give us the following information:

• Your name and account number.
• The dollar amount of the suspected error.
• Describe the error and explain, if you can, why you believe there is an error.
• If you need more information, describe the item you are unsure about.

We must hear from you no later than sixty (60) calendar days after we sent you the first statement upon which the error or problem first appeared. When contacting the Bank, please explain as clearly as you can why you believe there is an error or why more information is needed. Please include:

- Your name and account number.
- A description of the error or transaction you are unsure about.
- The dollar amount and date of the suspected error.

When making a verbal inquiry, the Bank may ask that you send us your complaint in writing within ten (10) business days after the first telephone call.

We will investigate your complaint and will correct any error promptly. If we take more than ten (10) business days to do this, we will credit your account for the amount you think is in error, so that you have the use of the money during the time it takes to complete our investigation.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your bill that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

Total interest credited by the Bank to you this year will be reported by the Bank to the Internal Revenue Service and State tax authorities. The amount to be reported will be reported separately to you by the Bank.

FINANCE CHARGES: Although the Bank uses the Daily Balance method to calculate the finance charge on your Moneyline/Overdraft Protection account (the term "ODP" or "OD" refers to Overdraft Protection), the Bank discloses the Average Daily Balance on the periodic statement as an easier method for you to calculate the finance charge. The finance charge begins to accrue on the date advances and other debits are posted to your account and will continue until the balance has been paid in full. To compute the finance charge, multiply the Average Daily Balance times the Days in Period times the Daily Periodic Rate (as listed in the Account Summary section on the front of the statement). The Average Daily Balance is calculated by adding the balance for each day of the billing cycle, then dividing the total balance by the number of Days in the Billing Cycle. The daily balance is the balance for the day after advances have been added and payments or credits have been subtracted plus or minus any other adjustments that might have occurred that day. There is no grace period during which no finance charge accrues. Finance charge adjustments are included in your total finance charge.



America's Bank

Debtor Name **LEWIS M. IRVING**

Case number **19-13930 (AMC)**

LEWIS M IRVING
DIP CASE 19-13930 EDPA

Page:

Statement Period:

Cust Ref #:

Primary Account #:

Dec 12 2019-Jan 11 2020

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4335

DAILY ACCOUNT ACTIVITY

Electronic Payments (continued)

POSTING DATE	DESCRIPTION	AMOUNT
01/02	DEBIT POS, *****30049599624, AUT 010220 DDA PURCHASE LOWE S 622 WILMINGTON * DE	5,127.82
01/02	DEBIT CARD PURCHASE, *****30049599624, AUT 010120 VISA DDA PUR US GAS 2 LLC WESTAMPTON * NJ	22.80
01/07	DEBIT CARD PURCHASE, *****30049599624, AUT 010620 VISA DDA PUR MID ATLANTIC RETINA WILM WILMINGTON * DE	198.00
01/07	DEBIT CARD PURCHASE, *****30049599624, AUT 010620 VISA DDA PUR MID ATLANTIC RETINA WILM WILMINGTON * DE	198.00
01/07	DEBIT POS, *****30049599624, AUT 010720 DDA PURCHASE GIANT 6116 1393 DILWOR WEST CHESTER * PA	76.60
01/07	DEBIT POS, *****30049599624, AUT 010720 DDA PURCHASE COSTCO GAS 1114 GLEN MILLS * PA	52.87
01/08	DEBIT CARD PAYMENT, *****30049599624, AUT 010720 VISA DDA PUR ATT BILL PAYMENT 800 288 2020 * TX	263.07
01/08	DEBIT CARD PAYMENT, *****30049599624, AUT 010720 VISA DDA PUR IDL PROSVEN 1 OF 1 800 7439654 * CA	109.75
01/08	DEBIT CARD PURCHASE *****30049599624, AUT 010620 VISA DDA PUR LOWES 00622 302 479 7799 * DE	98.00
01/09	DEBIT POS, *****30049599624, AUT 010920 DDA PURCHASE COSTCO WHSE 1114 GLEN MILLS * PA	177.77
01/10	DEBIT POS, *****30049599624, AUT 011020 DDA PURCHASE LOWE S 622 WILMINGTON * DE	109.92
Subtotal:		7,987.25

DAILY BALANCE SUMMARY

DATE	BALANCE	DATE	BALANCE
12/11	16,058.75	01/02	9,355.48
12/17	16,004.81	01/07	12,830.01
12/18	15,056.98	01/08	12,359.19
12/23	14,946.98	01/09	12,379.42
12/30	14,685.80	01/10	12,269.50
12/31	14,506.10		